## **CITY OF GLENDALE - BUILDING AND SAFETY**

THE STATE OF THE S

633 E. Broadway, Room 101 Glendale, CA 91206 - (818) 548-3200, 548-4830 (Inspection)

## SWIMMING POOL PERMIT WORKSHEET

Application No.

Please complete the section below clearly, legibly and in ink																
PROJECT ADDRESS, CITY AND ZIP UNIT (SUITE) NO.																
DESCRIPTION OF CONSTRUCTION:																
In the state of th																
		onstruction: (Includent) may be revised by the		abor	\$	Revised Valuation:  CHECK THIS BOX IF WORK  HAS ALREADY STARTED . Double the permit fee will be charged for legalization.										
DRAW OR ATTACH PLOT PLAN ON REVERSE SIDE OF THIS APPLICATION  Addition Alteration Apt/Condo (Demo Only) Commercial (Demo Only) Demolition Dwelling/Duplex  New Pool Spa  Note: For construction of public and semi-public pools contact Los Angeles County Health Department.  Pool Size X ft. Est. Capacity Gallons Pool Heater Type:																
Туре	Type Filter:  Cartridge  D.E. Filter (Separation Tank Required)  Backwash?  Gas Systomatics  Backwash?															
APN Lot				Tract		High Fire Hazard Zon	The Edition of	of the Code								
NO CONNECTION TO PUBLIC SEWER ALLOWED																
		APPLICANT'S NAME		MAU INC	ADDRESS		BUS. PHO	NE NO								
		PROPERTY OWNER'S NAME MAILING ADDRESS PHONE														
#		PROPERTY OWNER'S E-														
for		LICENSED DESIGN PROI NAME:	-ESSIONAL(ARCHITECT	OR ENGINEER IN CHARGE O	OF THE PROJECT) INFORM	PROJECT) INFORMATION: LICENSE NO.										
Check one for primary conta		MAILING ADDRESS: PHONE NO.														
Check one for the primary contact		E-MAIL ADDRESS:	MAIL ADDRESS:													
ŧ		GEOLOGIST NAME:														
	_	MAILING ADDRESS:														
		E-MAIL ADDRESS:														
CALIFORNIA LICENSED CONTRACTOR'S DECLARATION: I herby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commenci																
			of the Business an	d Professions Code, ar	nd my license is in fu ADDRESS	II force and	PHONE N	o. I								
CONTRACTOR'S NAME MAILING ADDRESS PHONE NO.  MAILING ADDRESS:																
CONTRACTOR'S E-MAIL ADDRESS																
LICENSE CLASS AND NUMBER CONTRACTOR SIGNATURE																
				FOR (	OFFICE USE ONLY	1										
Engine Hillside		· —	tance from the face	e of the curb to Propert	ty Line	ft										
OK TO S			ATURE	DATE	ACCEPTED BY:	DATE	RECEIPT NO.	P.C								
PRINT								Y N								
ZONING SIGNATURE DATE G.W.F				G.W.P. WATER PRINT	G.W.P. WATER SIGNATURE DATE ENERGY											
DESIGN REVIEW SIGNATURE DATE PRINT					G.W.P. ELECTRIC SIGNATURE DATE CAL-GREE											
ENGINEI PRINT	RING	3	SIGNATURE	DATE	Y											
OK TO IS	SUE	PERMIT BY:	SIGNATURE	DATE	ACCEPTED BY:	DATE	RECEIPT NO.	(Pages) PERMIT								
THE CITY	OF G	LENDALE DESTRICTS ISSUAN	CE OF THE RUILDING PERM	MIT TO THE PROPERTY OWNER	OR LICENSED GENERAL CON	TRACTOR ONLY SIGNATURES OF	THIS INDIVIDUAL MUST BE VEDICE	⊢γ N								

BUILDING PERMIT NO.		
ADDRESS		

INSPECTIONS	APPVD	DATE	INSPECTIONS	APPVD	
GUNNITE & BONDING					
G GROUNDWORK					
S GROUNDWORK					
LECT GROUNDWORK					
ENCE & GATE					
INAL PLBG					
FINAL ELECT					
INAL POOL					
DO NOT FILL POOL ( & GATE ARE AP		CE			
OCCUPANCY OF THIS PO					
OF THE CITY OF GLENDAL	_				

Please Draw a Plot Plan: Locate all structures on lot, indicate on the arrows below which direction is North.

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